

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of Texas

Case number (If known): _____ Chapter you are filing under:



Chapter 7



Chapter 11



Chapter 12



Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Dawna

First name

Mary

Middle name

Icenhour

Last name

Suffix (Sr., Jr, II, III)_____
First name_____
Middle name_____
Last name_____
Suffix (Sr., Jr, II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First name_____
Middle name_____
Last name_____
First name_____
Middle name_____
Last name_____
First name_____
Middle name_____
Last name_____
First name_____
Middle name_____
Last name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 6 5 5 1

OR

9xx - xx - ____ ____ ____ ____

xxx - xx - ____ ____ ____ ____

OR

9xx - xx - ____ ____ ____ ____

Debtor 1

Dawna

First Name

Mary

Middle Name

Icenhour

Last Name

Case number (if known) _____

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**Include trade names and *doing business as* names☐ I have not used any business names or EINs.Building Hope Medical Staffing DBA

Business name

Professional Nursing Resources, LLC

Business name

____ - _____
EIN____ - _____
EIN**About Debtor 2 (Spouse Only in a Joint Case):**☐ I have not used any business names or EINs._____
Business name_____
Business name____ - _____
EIN____ - _____
EIN**5. Where you live**315 Parkwood Ln

Number Street

Coppell, TX 75019

City State ZIP Code

Dallas

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address._____
Number Street_____
P.O. Box_____
City State ZIP Code**If Debtor 2 lives at a different address:**_____
Number Street_____
City State ZIP Code_____
County**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address._____
Number Street_____
P.O. Box_____
City State ZIP Code**6. Why you are choosing this district to file for bankruptcy***Check one:*☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408)_____

_____*Check one:*☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408)_____

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

8. How you will pay the fee

☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No.

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No.

☐ Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY
Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

☐ No. Go to line 12.

☒ Yes. Has your landlord obtained an eviction judgment against you?

☒ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☐ No. Go to Part 4.☒ Yes. Name and location of businessBuilding Hope Medical Staffing DBA

Name of business, if any

315 Parkwood Ln

Number Street

Coppell

City

TX

State

75019

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☒ None of the above**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No.☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property? _____

Number Street

City

State

ZIP Code

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?****16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.**17. Are you filing under Chapter 7?**☐ No. I am not filing under Chapter 7. Go to line 18.**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

- ☐ No
☒ Yes

18. How many creditors do you estimate that you owe?

- ☒ 1-49 ☐ 1,000-5,000 ☐ 25,001-50,000 ☐ 50,000-100,000 ☐ More than 100,000
☐ 50-99 ☐ 5,001-10,000
☐ 100-199 ☐ 10,001-25,000
☐ 200-999

19. How much do you estimate your assets to be worth?

- ☒ \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

20. How much do you estimate your liabilities to be?

- ☐ \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☒ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X/s/ Dawna Mary Icenhour

Dawna Mary Icenhour, Debtor 1

Executed on 05/15/2020

MM/ DD/ YYYY

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X/s/ Randy Leigh Tipton

Signature of Attorney for Debtor

Date 05/15/2020

MM / DD / YYYY

Randy Leigh Tipton

Printed name

Lee Law Firm, PLLC

Firm name

8701 Bedford Euless Rd 510

Number Street

Hurst

City

TX

State

76053

ZIP Code

Contact phone (817) 265-0123Email address rtipton@leebankruptcy.com24039860

Bar number

TX

State

Fill in this information to identify your case and this filing:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number | | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
☐ Yes. Where is the property?

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....



\$0.00

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles☐ No☒ Yes

3.1 Make:

Kia**Who has an interest in the property?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this is community property (see instructions)

Model:

Sorento

Year:

2011

Approximate mileage:

183000

Other information:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the
entire property?

\$4,050.00

Current value of the
portion you own?

\$4,050.00**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

→

\$4,050.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the
portion you own?**

Do not deduct secured
claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No☒ Yes. Describe.....See Attached.\$1,290.00**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No☒ Yes. Describe.....See Attached.\$725.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No☒ Yes. Describe.....Antiques\$100.00

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☐ No☒ Yes. Describe.....

Musical Instruments

\$50.00**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....

See Attached.

\$1,100.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....

Costume jewelry

\$50.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.....

1 Dog 1 Cat

\$0.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Describe.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here..... →**\$3,315.00**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes..... Cash.....

Debtor 1

Dawna**Mary****Icenhour**

Case number (if known) _____

First Name

Middle Name

Last Name

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes.....

Institution name:

17.1. Checking account: Wells Fargo #7565 \$4,000.00

17.2. Checking account: Texan Credit Union #4871 \$414.69

17.3. Savings account: Texan Credit Union #6423 \$20.00

17.4. Savings account: Wells Fargo #1698 Son's account \$0.00

17.5. Certificates of deposit: _____

17.6. Other financial account: Texan CU Travel Shares #6426 \$20.79

17.7. Other financial account: _____

17.8. Other financial account: _____

17.9. Other financial account: _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific
information about
them.....

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each account
separately.

Type of account:

Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☐ No☒ Yes.....

Institution name or individual:

Security deposit on
rental unit:Brigitte Davis\$1,100.00**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....

Issuer name and description:

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them....

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them....

27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them....

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.....

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

Debtor 1

Dawna**Mary****Icenhour**

Case number (if known) _____

First Name

Middle Name

Last Name

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☐ No☒ Yes. Give specific information.....

Federal stimulus

\$1,700.00**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value....

Company name:

Beneficiary:

Surrender or refund value:

BCBS health insurance policy**No cash value**\$0.00**USAA auto insurance policy****No cash value**\$0.00**USAA renter's insurance policy****No cash value**\$0.00**Fidelity Term Life insurance policy****No cash value**\$0.00**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.....**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information.....

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →

\$7,255.48

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☐ No. Go to Part 6.
☒ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe.....

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☐ No
☒ Yes. Describe.....

Printer

\$40.00

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe.....

41. Inventory

- ☒ No
☐ Yes. Describe.....

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe.....

Name of entity:

% of ownership:

_____%

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

- ☒ No
☐ Yes. Describe.....

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific
information.....

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....→

\$40.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

☒ No
☐ Yes.....

48. **Crops—either growing or harvested**

☒ No
☐ Yes. Give specific
information.....

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

☒ No
☐ Yes.....

50. **Farm and fishing supplies, chemicals, and feed**

☒ No
☐ Yes.....

51. **Any farm- and commercial fishing-related property you did not already list**

☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....→

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here.....→

\$0.00**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....→

\$0.0056. Part 2: Total vehicles, line 5 \$4,050.0057. Part 3: Total personal and household items, line 15 \$3,315.0058. Part 4: Total financial assets, line 36 \$7,255.4859. Part 5: Total business-related property, line 45 \$40.0060. Part 6: Total farm- and fishing-related property, line 52 \$0.0061. Part 7: Total other property not listed, line 54 + \$0.00

62. Total personal property. Add lines 56 through 61.....

\$14,660.48

Copy personal property total →

+ \$14,660.48

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$14,660.48

Debtor 1

DawnaMaryIcenhour

Case number (if known) _____

First Name

Middle Name

Last Name

SCHEDULE A/B: PROPERTY

Continuation Page

6. Household goods and furnishings

| | |
|-----------------------|----------|
| Refrigerator | \$80.00 |
| Freezer | \$80.00 |
| Washing Machine | \$60.00 |
| Dryer | \$60.00 |
| Living Room Furniture | \$200.00 |
| Silverware | \$100.00 |
| Bedroom Furniture | \$250.00 |
| Household Tools | \$100.00 |
| Plates/China | \$200.00 |
| Den Furniture | \$120.00 |
| Dining Room Furniture | \$40.00 |

7. Electronics

| | |
|-------------|----------|
| Televisions | \$150.00 |
| Radio | \$15.00 |
| Cameras | \$30.00 |
| Computers | \$400.00 |
| Scanner | \$30.00 |
| Cell Phone | \$100.00 |

11. Clothes

| | |
|------------------|----------|
| Everyday Clothes | \$500.00 |
| Shoes | \$200.00 |
| Accessories | \$400.00 |

17. Deposits of money

| | |
|--|--------|
| Checking account: <u>Wells Fargo #7573 Son's account</u> | \$0.00 |
|--|--------|

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|--|------------------------------------|
| Brief description: <u>2011 Kia Sorento</u> | <u>\$4,050.00</u> | <input checked="" type="checkbox"/> <u>\$4,000.00</u> | <u>11 U.S.C. § 522(d)(2)</u> |
| Line from Schedule A/B: <u>3.1</u> | | <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| | | <input checked="" type="checkbox"/> <u>\$50.00</u> | <u>11 U.S.C. § 522(d)(5)</u> |
| | | <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Brief description: <u>Refrigerator</u> | <u>\$80.00</u> | <input checked="" type="checkbox"/> <u>\$80.00</u> | <u>11 U.S.C. § 522(d)(3)</u> |
| Line from Schedule A/B: <u>6</u> | | <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 2: Additional Page**3. Are you claiming a homestead exemption of more than \$170,350?**

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No☐ Yes

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|--|---|
| Brief description: Freezer Line from Schedule A/B: <u>6</u> | \$80.00 | <input checked="" type="checkbox"/> \$80.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Washing Machine Line from Schedule A/B: <u>6</u> | \$60.00 | <input checked="" type="checkbox"/> \$60.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Dryer Line from Schedule A/B: <u>6</u> | \$60.00 | <input checked="" type="checkbox"/> \$60.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Living Room Furniture Line from Schedule A/B: <u>6</u> | \$200.00 | <input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Silverware Line from Schedule A/B: <u>6</u> | \$100.00 | <input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Bedroom Furniture Line from Schedule A/B: <u>6</u> | \$250.00 | <input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Household Tools Line from Schedule A/B: <u>6</u> | \$100.00 | <input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Plates/China Line from Schedule A/B: <u>6</u> | \$200.00 | <input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Den Furniture Line from Schedule A/B: <u>6</u> | \$120.00 | <input checked="" type="checkbox"/> \$120.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|--|---|
| Brief description: Dining Room Furniture Line from Schedule A/B: <u>6</u> | \$40.00 | <input checked="" type="checkbox"/> \$40.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Televisions Line from Schedule A/B: <u>7</u> | \$150.00 | <input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Radio Line from Schedule A/B: <u>7</u> | \$15.00 | <input checked="" type="checkbox"/> \$15.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Cameras Line from Schedule A/B: <u>7</u> | \$30.00 | <input checked="" type="checkbox"/> \$30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Computers Line from Schedule A/B: <u>7</u> | \$400.00 | <input checked="" type="checkbox"/> \$400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Scanner Line from Schedule A/B: <u>7</u> | \$30.00 | <input checked="" type="checkbox"/> \$30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Cell Phone Line from Schedule A/B: <u>7</u> | \$100.00 | <input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Antiques Line from Schedule A/B: <u>8</u> | \$100.00 | <input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Musical Instruments Line from Schedule A/B: <u>9</u> | \$50.00 | <input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|--|--|---|---|
| Brief description: Everyday Clothes Line from Schedule A/B: <u>11</u> | <u>\$500.00</u> | <input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Shoes Line from Schedule A/B: <u>11</u> | <u>\$200.00</u> | <input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Accessories Line from Schedule A/B: <u>11</u> | <u>\$400.00</u> | <input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) _____ _____ |
| Brief description: Costume jewelry Line from Schedule A/B: <u>12</u> | <u>\$50.00</u> | <input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(4) _____ _____ |
| Brief description: Wells Fargo #7565 Checking account Line from Schedule A/B: <u>17</u> | <u>\$4,000.00</u> | <input checked="" type="checkbox"/> <u>\$4,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) _____ _____ |
| Brief description: Texan Credit Union #6423 Savings account Line from Schedule A/B: <u>17</u> | <u>\$20.00</u> | <input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) _____ _____ |
| Brief description: Texan CU Travel Shares #6426 Other financial account Line from Schedule A/B: <u>17</u> | <u>\$20.79</u> | <input checked="" type="checkbox"/> <u>\$20.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) _____ _____ |
| Brief description: Texan Credit Union #4871 Checking account Line from Schedule A/B: <u>17</u> | <u>\$414.69</u> | <input checked="" type="checkbox"/> <u>\$414.69</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) _____ _____ |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|--|------------------------------------|
| Brief description: Wells Fargo #7573 Son's account Checking account | \$0.00 | <input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: <u>17</u> | | | |
| Brief description: Wells Fargo #1698 Son's account Savings account | \$0.00 | <input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: <u>17</u> | | | |
| Brief description: Brigitte Davis Security deposit on rental unit | \$1,100.00 | <input checked="" type="checkbox"/> \$1,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: <u>22</u> | | | |
| Brief description: Federal stimulus | \$1,700.00 | <input checked="" type="checkbox"/> \$1,700.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: <u>30</u> | | | |
| Brief description: Printer | \$40.00 | <input checked="" type="checkbox"/> \$40.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(6) |
| Line from Schedule A/B: <u>39</u> | | | |

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

IN RE: **Icenhour, Dawna Mary**

CASE NO

CHAPTER **Chapter 7****SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)****Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-----|--|-------------------------|-----------------------|--------------|------------------------|----------------------------|
| 1. | Real Estate | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3. | Motor vehicle | \$4,050.00 | \$0.00 | \$4,050.00 | \$4,050.00 | \$0.00 |
| 4. | Watercraft, trailers, motors homes, and accessories | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | Household goods and furnishings | \$1,290.00 | \$0.00 | \$1,290.00 | \$1,290.00 | \$0.00 |
| 7. | Electronics | \$725.00 | \$0.00 | \$725.00 | \$725.00 | \$0.00 |
| 8. | Collectibles of value | \$100.00 | \$0.00 | \$100.00 | \$100.00 | \$0.00 |
| 9. | Equipment for sports and hobbies | \$50.00 | \$0.00 | \$50.00 | \$50.00 | \$0.00 |
| 10. | Firearms | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11. | Clothes | \$1,100.00 | \$0.00 | \$1,100.00 | \$1,100.00 | \$0.00 |
| 12. | Jewelry | \$50.00 | \$0.00 | \$50.00 | \$50.00 | \$0.00 |
| 13. | Nonfarm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 14. | Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 16. | Cash | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 17. | Deposits of money | \$4,455.48 | \$0.00 | \$4,455.48 | \$4,455.48 | \$0.00 |
| 18. | Bonds, mutual funds, or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 19. | Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 20. | Bonds and other financial instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 21. | Retirement or pension accounts | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 22. | Security deposits and prepayments | \$1,100.00 | \$0.00 | \$1,100.00 | \$1,100.00 | \$0.00 |
| 23. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 24. | Interest in a qualified education fund, such as an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 25. | Trusts, equitable or future interests in property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 26. | Copyrights, trademarks, websites and other intellectual property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 27. | Licenses, Franchises, and other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 28. | Tax refunds | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 29. | Family support | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 30. | Other amounts owed to the debtor | \$1,700.00 | \$0.00 | \$1,700.00 | \$1,700.00 | \$0.00 |
| 31. | Insurance policies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 32. | Interest in property from deceased | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 33. | Claims against third parties | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

IN RE: **Icenhour, Dawna Mary**

CASE NO

CHAPTER **Chapter7****SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)***Continuation Sheet #1***Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|----------------|---|-------------------------|-----------------------|--------------------|------------------------|----------------------------|
| 34. | All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 35. | Other financial asset | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 38. | Accounts receivable | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 39. | Office equipment, furnishings, and supplies | \$40.00 | \$0.00 | \$40.00 | \$40.00 | \$0.00 |
| 40. | Machinery, fixtures and equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 41. | Inventory | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 42. | Interests in partnerships or joint ventures | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 43. | Customer lists | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 44. | Other businessrelated property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 47. | Farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 48. | Crops | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 49. | Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 50. | Supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 51. | Other farm or fishing related property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 53. | Other Assets | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| TOTALS: | | \$14,660.48 | \$0.00 | \$14,660.48 | \$14,660.48 | \$0.00 |

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

IN RE: **Icenhour, Dawna Mary**

CASE NO

CHAPTER **Chapter7****SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)***Continuation Sheet #2***Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

| Property Description | Market Value | Lien | Equity |
|---------------------------------|--------------|--------|--------|
| <u>Real Property</u> | | | |
| (None) | | | |
| <u>Personal Property</u> | | | |
| (None) | | | |
| TOTALS: | \$0.00 | \$0.00 | \$0.00 |

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

| Property Description | Market Value | Lien | Equity | Non-Exempt Amount |
|---------------------------------|--------------|--------|-------------|-------------------|
| <u>Real Property</u> | | | | |
| (None) | | | | |
| <u>Personal Property</u> | | | | |
| (None) | | | | |
| TOTALS: | \$14,660.48 | \$0.00 | \$14,660.48 | \$0.00 |

| Summary | |
|---|--------------------|
| A. Gross Property Value (not including surrendered property) | \$14,660.48 |
| B. Gross Property Value of Surrendered Property | \$0.00 |
| C. Total Gross Property Value (A+B) | \$14,660.48 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$0.00 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$0.00 |
| F. Total Gross Encumbrances (D+E) | \$0.00 |
| G. Total Equity (not including surrendered property) / (A-D) | \$14,660.48 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$14,660.48 |
| J. Total Exemptions Claimed (Wild Card Used: \$7,305.48, Available: \$6,594.52) | \$14,660.48 |
| K. Total Non-Exempt Property Remaining (G-J) | \$0.00 |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

☒ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| Column A | Column B | Column C |
|--|--|-------------------|
| Amount of claim | Value of collateral that supports this claim | Unsecured portion |
| Do not deduct the value of collateral. | | If any |

2.1 Describe the property that secures the claim:

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Debtor 1

Dawna**Mary****Icenhour**

First Name

Middle Name

Last Name

Case number (if known) _____

Part 1:**Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral****that supports this claim***Column C***Unsecured****portion**
If any**2.2**

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt****Date debt was incurred** _____**Describe the property that secures the claim:****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)**Last 4 digits of account number** ____ _**Add the dollar value of your entries in Column A on this page. Write that number here:**

\$0.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$0.00

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
 (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1

Lee Law Firm, PLLC

Priority Creditor's Name

8701 Bedford Euless Rd 510

Number Street

Hurst, TX 76053

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☒ Other. Specify **Attorney Fees**

| Total claim | Priority amount | Nonpriority amount |
|---------------|-----------------|--------------------|
| <u>\$0.00</u> | <u>\$0.00</u> | <u>\$0.00</u> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | Total claim | |
|-----|--|--|-------------------|
| 4.1 | AES/NCT Nonpriority Creditor's Name P.O. Box 61047 Number Street Harrisburg, PA 17106 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number <u>9666</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Student Loans | <u>\$2,366.00</u> |
| 4.2 | AES/RBS Citizens Nonpriority Creditor's Name PO Box 61047 Number Street Harrisburg, PA 17106 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number <u>9666</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Student loan | <u>\$2,285.00</u> |
| 4.3 | Bank of America Nonpriority Creditor's Name PO Box 982238 Number Street El Paso, TX 79998 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number <u>0190</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card | <u>\$4,500.00</u> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim |
|--|--|---|
| 4.4 | <p>Capital One Nonpriority Creditor's Name P.O. Box 30285 Number Street Salt Lake City, UT 84130 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card</p> <p>\$669.00</p> |
| 4.5 | <p>Citicards CBNA Nonpriority Creditor's Name P.O. Box 6241 Number Street Sioux Falls, SD 57117 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>9298</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card</p> <p>\$2,240.00</p> |
| 4.6 | <p>Comenitycb/Ulta Nonpriority Creditor's Name P.O. Box 182120 Number Street Columbus, OH 43218 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>9970</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card</p> <p>\$3,714.00</p> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim |
|--|---|---|
| 4.7 | <p>Credit One Bank Nonpriority Creditor's Name PO Box 98875 Number Street Las Vegas, NV 89193 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>0329</u> \$443.00</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card</p> |
| 4.8 | <p>Envision Physician Services Nonpriority Creditor's Name PO Box 99082 Number Street Las Vegas, NV 89193 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>9344</u> \$683.00</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Bill</p> |
| 4.9 | <p>Equiant Financial Services Nonpriority Creditor's Name 5401 N Pima Rd 150 Number Street Scottsdale, AZ 85250 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>5691</u> \$6,370.00</p> <p>When was the debt incurred? <u>10/04/2017</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Other</p> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim | |
|--|---|---|--------------------|
| 4.10 | <p>Fed Loan Serv Nonpriority Creditor's Name PO Box 60610 Number Street Harrisburg, PA 17106 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>2832</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Student loan</p> | <u>\$29,989.00</u> |
| 4.11 | <p>Medical City Arlington Nonpriority Creditor's Name PO Box 99400 Number Street Louisville, KY 40269 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>9344</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Bill</p> | <u>\$441.54</u> |
| 4.12 | <p>Medicredit Nonpriority Creditor's Name PO Box 1629 Number Street Maryland Heights, MO 63043 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>9557</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - Southwest Scoliosis</p> | <u>\$0.00</u> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim |
|--|--|---|
| 4.13 | <p>Mercantile Admnt Bur Nonpriority Creditor's Name <u>165 Lawrence Bell Dr</u> Number Street <u>Buffalo, NY 14221</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>0B02</u> <u>\$0.00</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - Bank of America</p> |
| 4.14 | <p>North Shore Agency Nonpriority Creditor's Name <u>270 Spagnoli Rd 110</u> Number Street <u>Melville, NY 11747</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>8005</u> <u>\$53.02</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - The Bradford Exchange</p> |
| 4.15 | <p>Omega RMS Nonpriority Creditor's Name <u>PO Box 9228</u> Number Street <u>Coral Springs, FL 33065</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>8443</u> <u>\$0.00</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - Universal</p> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim | |
|--|---|--|--------------------|
| 4.16 | <p>Peoplefund Nonpriority Creditor's Name <u>2921 E 17th St</u> Number Street <u>Austin, TX 78702</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>2771</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Business Debt</p> | \$10,454.00 |
| 4.17 | <p>Radius Global Solutions Nonpriority Creditor's Name <u>7831 Glenray Rd 250A</u> Number Street <u>Minneapolis, MN 55439</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>4334</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - Envision Physician</p> | \$0.00 |
| 4.18 | <p>Sequium Assett Solutions, LLC Nonpriority Creditor's Name <u>1130 Northchase Parkway 150</u> Number Street <u>Marietta, GA 30067</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - Verizon</p> | \$0.00 |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim |
|--|--|---|
| 4.19 | <p>Southwest Scoliosis Institute Nonpriority Creditor's Name PO Box 668 Number Street Brentwood, TN 37024 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>1250</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Bill</p> |
| 4.20 | <p>Texans Credit Union Nonpriority Creditor's Name 777 E. Campbell Rd Number Street Richardson, TX 75081 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Line of Credit</p> |
| 4.21 | <p>Universal Account Servicing/OTA Nonpriority Creditor's Name PO Box 901571 Number Street Kansas City, MO 64190 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>3236</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Bill</p> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | Total claim |
|--|--|--|
| 4.22 | <p>Verizon Wireless Nonpriority Creditor's Name P.O. Box 408 Number Street Newark, NJ 07101 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>0001</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Utilities</p> <p>\$939.31</p> |
| 4.23 | <p>Whooping Crane Properties Nonpriority Creditor's Name 20720 Ventura Blvd 300 Number Street Woodland Hills, CA 91364 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>7334</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lease deficiency</p> <p>\$4,050.00</p> |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | Total claim |
|---------------------------------|--|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$0.00</u> |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. + <u>\$0.00</u> |
| | 6e. Total. Add lines 6a through 6d. | 6e. <u>\$0.00</u> |

| | | Total claim |
|---------------------------------|---|--------------------------|
| Total claims from Part 2 | 6f. Student loans | 6f. <u>\$34,640.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <u>\$0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + <u>\$39,649.03</u> |
| | 6j. Total. Add lines 6f through 6i. | 6j. <u>\$74,289.03</u> |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease | State what the contract or lease is for |
|-----|---|---|
| 2.1 | <u>Richard & Brigitte Davis</u> Name <u>315 Parkwood Ln</u> Number Street <u>Coppell, TX 75019</u> City State ZIP Code | Residential Lease Contract to be ASSUMED |
| 2.2 | _____ Name _____ Number Street _____ City State ZIP Code | |
| 2.3 | _____ Name _____ Number Street _____ City State ZIP Code | |
| 2.4 | _____ Name _____ Number Street _____ City State ZIP Code | |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 | _____ | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number | _____ | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

Name

Number Street

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number | | | |
| (if known) | | | |

Check if this is:

☐ An amended filing☐ A supplement showing postpetition chapter 13 income as of the following date:MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

☒ Employed ☐ Not EmployedMedical Review LVNOne Share Health3701 Regent Blvd 100
Number StreetIrving, TX 75063

City

State

Zip Code

2 months

Debtor 2 or non-filing spouse

☐ Employed ☐ Not Employed

Number Street

City

State

Zip Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. **Estimate and list monthly overtime pay.**

4. **Calculate gross income.** Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$4,249.44\$0.003. + \$1,131.39+ \$0.004. \$5,380.83\$0.00

Debtor 1

Dawna**Mary****Icenhour**

First Name

Middle Name

Last Name

Case number (if known) _____

| | | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---|-------|--------------|-----------------------------------|
| Copy line 4 here.....→ | 4. | \$5,380.83 | \$0.00 |
| 5. List all payroll deductions: | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$1,176.26 | \$0.00 |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | \$0.00 |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 |
| 5e. Insurance | 5e. | \$361.48 | \$0.00 |
| 5f. Domestic support obligations | 5f. | \$0.00 | \$0.00 |
| 5g. Union dues | 5g. | \$0.00 | \$0.00 |
| 5h. Other deductions. Specify: _____ | 5h. + | \$0.00 | \$0.00 |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | 6. | \$1,537.73 | \$0.00 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$3,843.10 | \$0.00 |
| 8. List all other income regularly received: | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$0.00 | \$0.00 |
| 8b. Interest and dividends | 8b. | \$0.00 | \$0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | \$0.00 |
| 8d. Unemployment compensation | 8d. | \$0.00 | \$0.00 |
| 8e. Social Security | 8e. | \$0.00 | \$0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____ | 8f. | \$0.00 | \$0.00 |
| 8g. Pension or retirement income | 8g. | \$0.00 | \$0.00 |
| 8h. Other monthly income. Specify: _____ | 8h. + | \$0.00 | \$0.00 |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$0.00 | \$0.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | \$3,843.10 | \$0.00 |
| 11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____ | 11. + | \$0.00 | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies | 12. | \$3,843.10 | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____ | | | |

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

1. Employment information for Debtor 1**Occupation**LVN**Employer's name**Enterprise**Employer's address**Number StreetCityStateZip Code**How long employed there?**1 year

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

Check if this is:

☐ An amended filing☐ A supplement showing postpetition chapter 13 income as of the following date:_____
MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Child

17

☐ No. ☒ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$1,575.00

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$0.00

4d. Homeowner's association or condominium dues

4d. \$0.00

Debtor 1

Dawna**Mary****Icenhour**

First Name

Middle Name

Last Name

Case number (if known) _____

| | | Your expenses | |
|------|--|---------------|----------------|
| 5. | Additional mortgage payments for your residence , such as home equity loans | 5. | _____ |
| 6. | Utilities: | | |
| 6a. | Electricity, heat, natural gas | 6a. | _____ \$220.00 |
| 6b. | Water, sewer, garbage collection | 6b. | _____ \$90.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | _____ \$164.00 |
| 6d. | Other. Specify: _____ Cable & Internet | 6d. | _____ \$125.00 |
| 7. | Food and housekeeping supplies | 7. | _____ \$500.00 |
| 8. | Childcare and children's education costs | 8. | _____ \$0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | _____ \$150.00 |
| 10. | Personal care products and services | 10. | _____ \$100.00 |
| 11. | Medical and dental expenses | 11. | _____ \$50.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | _____ \$300.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | _____ \$12.50 |
| 14. | Charitable contributions and religious donations | 14. | _____ \$0.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. | Life insurance | 15a. | _____ \$30.00 |
| 15b. | Health insurance | 15b. | _____ \$0.00 |
| 15c. | Vehicle insurance | 15c. | _____ \$145.00 |
| 15d. | Other insurance. Specify: _____ | 15d. | _____ \$0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. | _____ \$0.00 |
| 17. | Installment or lease payments: | | |
| 17a. | Car payments for Vehicle 1 | 17a. | _____ |
| 17b. | Car payments for Vehicle 2 | 17b. | _____ |
| 17c. | Other. Specify: _____ Student Loans | 17c. | _____ \$350.00 |
| 17d. | Other. Specify: _____ | 17d. | _____ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | _____ \$0.00 |
| 19. | Other payments you make to support others who do not live with you. Specify: _____ | 19. | _____ \$0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. | Mortgages on other property | 20a. | _____ \$0.00 |
| 20b. | Real estate taxes | 20b. | _____ \$0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | _____ \$0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | _____ \$0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. | _____ \$0.00 |

Debtor 1

Dawna**Mary****Icenhour**

First Name

Middle Name

Last Name

Case number (if known) _____

21. **Other.** Specify: _____21. **+** _____ **\$0.00**22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. _____ **\$3,811.50**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. _____ **\$0.00**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. _____ **\$3,811.50**23. **Calculate your monthly net income.**23a. Copy line 12 (your combined monthly income) from *Schedule I*.23a. _____ **\$3,843.10**

23b. Copy your monthly expenses from line 22c above.

23b. **-** _____ **\$3,811.50**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.23c. _____ **\$31.60**24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes.

None

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

| | | |
|---|-------|-------------|
| 1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> | _____ | \$0.00 |
| 1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> | _____ | \$14,660.48 |
| 1c. Copy line 63, Total of all property on <i>Schedule A/B</i> | _____ | \$14,660.48 |

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

| | | |
|---|-------|--------|
| 2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> | _____ | \$0.00 |
|---|-------|--------|

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

| | | |
|--|-------|-------------|
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | _____ | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | + | \$74,289.03 |

Your total liabilities

| |
|-------------|
| \$74,289.03 |
|-------------|

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

| | | |
|---|-------|------------|
| Copy your combined monthly income from line 12 of <i>Schedule I</i> | _____ | \$3,843.10 |
|---|-------|------------|

5. *Schedule J: Your Expenses* (Official Form 106J)

| | | |
|---|-------|------------|
| Copy your monthly expenses from line 22c of <i>Schedule J</i> | _____ | \$3,811.50 |
|---|-------|------------|

Debtor 1

DawnaMaryIcenhour

First Name

Middle Name

Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.☒ Yes**7. What kind of debt do you have?**☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.\$4,863.76**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:****Total claim****From Part 4 on Schedule E/F, copy the following:**9a. Domestic support obligations (Copy line 6a.) \$0.009b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.009c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.009d. Student loans. (Copy line 6f.) \$34,640.009e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.009f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) **+** \$0.009g. **Total.** Add lines 9a through 9f. \$34,640.00

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No



Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature
(Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Dawna Mary Icenhour

Dawna Mary Icenhour, Debtor 1

Date 05/15/2020

MM/ DD/ YYYY

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
- ☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
- ☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

| Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
|---|--|---|---|
| <u>202 Samuel Blvd 3C</u> Number Street <u>Coppell, TX 75019</u> City State ZIP Code | From <u>11/2012</u> To <u>04/2018</u> | <input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code | <input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code |
| _____ Number Street _____ City State ZIP Code | From _____ To _____ | <input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code | <input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code |

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|---|--|---|--|
| | Sources of income Check all that apply. | Gross Income (before deductions and exclusions) | Sources of income Check all that apply. | Gross Income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$19,281.84 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | |
| For last calendar year: (January 1 to December 31, <u>2019</u>) YYYY | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business | \$9,800.00 \$24,503.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | |
| For the calendar year before that: (January 1 to December 31, <u>2018</u>) YYYY | <input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business | \$9,989.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|--------------------------------------|---|--------------------------------------|---|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | | | |
| For last calendar year: (January 1 to December 31, <u>2019</u>) YYYY | IRA | \$5,034.00 | | |
| For the calendar year before that: (January 1 to December 31, <u>2018</u>) YYYY | | | | |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| | Dates of payment | Total amount paid | Amount you still owe | Was this payment for... |
|---------------------|------------------|-------------------|----------------------|---|
| Creditor's Name | | | | <input type="checkbox"/> Mortgage |
| Number Street | | | | <input type="checkbox"/> Car |
| | | | | <input type="checkbox"/> Credit card |
| | | | | <input type="checkbox"/> Loan repayment |
| | | | | <input type="checkbox"/> Suppliers or vendors |
| City State ZIP Code | | | | <input type="checkbox"/> Other _____ |

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ No

☒ Yes. List all payments to an insider.

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|---|------------------|-------------------|----------------------|---------------------------|
| David Icenhour Insider's Name | | \$280.00 | \$0.00 | Dad sign for student loan |
| 135 Tres Lagos Number Street | | | | |
| Gun Barell City, City State ZIP Code | | | | |

| | | | | | |
|----------|--------------|-------------|-----------------|------------------------------|--|
| Debtor 1 | Dawna | Mary | Icenhour | Case number (if known) _____ | |
| | First Name | Middle Name | Last Name | | |

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|------------------|-------------------|----------------------|--|
| <u>Daniel Icenhour</u> Insider's Name <u>315 Parkwood Ln</u> Number Street <u>Coppell, TX 75019</u> City State ZIP Code | | \$280.00 | \$70.00 | Brother let her borrow money for vet bills |

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|------------------|-------------------|----------------------|-------------------------|
| Insider's Name Number Street City State ZIP Code | | | | Include creditor's name |

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No

☐ Yes. Fill in the details.

| | Nature of the case | Court or agency | Status of the case |
|---|--------------------|--|--|
| Case title _____ Case number _____ | | Court Name Number Street City State ZIP Code | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

| | | | | |
|----------|--------------|-------------|-----------------|------------------------------|
| Debtor 1 | Dawna | Mary | Icenhour | Case number (if known) _____ |
| | First Name | Middle Name | Last Name | |

| | | | |
|-------------------------|--|-------|-----------------------|
| Describe the property | | Date | Value of the property |
| _____ _____ _____ | | _____ | _____ |

| | |
|---|--|
| Explain what happened | |
| <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. | |

| | | | |
|-----------------|--------|----------|-------|
| Creditor's Name | | _____ | |
| Number | Street | _____ | |
| _____ | | _____ | |
| City | State | ZIP Code | _____ |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
- ☐ Yes. Fill in the details.

| | | | |
|---------------------------------------|--|-----------------------|--------|
| Describe the action the creditor took | | Date action was taken | Amount |
| _____ _____ _____ | | _____ | _____ |

| | | | |
|-----------------|--------|----------|-------|
| Creditor's Name | | _____ | |
| Number | Street | _____ | |
| _____ | | _____ | |
| City | State | ZIP Code | _____ |

Last 4 digits of account number: XXXX- __ __ __ __

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
- ☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
- ☐ Yes. Fill in the details for each gift.

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|---|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____ | | | |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?



No

☐ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
|--|-------------------------------|----------------------|-------|
| Charity's Name _____ Number Street _____ City State ZIP Code | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?



No

☐ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
| | | | |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|-----------------------------------|-------------------|
| <u>Lee Law Firm, PLLC</u> Person Who Was Paid <u>8701 Bedford Euleess Rd 510</u> Number Street <u>Hurst, TX 76053</u> City State ZIP Code Email or website address Person Who Made the Payment, if Not You | Attorney's Fee 5/12/2020 | \$2,615.00 |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☐ No

☒ Yes. Fill in the details.

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|--|
| <u>ClearOne Advantage</u> Person Who Was Paid <u>1501 S Clinton St 320</u> Number Street <u>Baltimore, MD 21224</u> City State ZIP Code | Debt consolidation 12/2019 11/2019 10/2019 9/2019 8/2019 7/2019 6/2019 5/2019 | \$280.00 \$280.00 \$280.00 \$280.00 \$280.00 \$280.00 \$280.00 \$280.00 |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

☒ No

☐ Yes. Fill in the details.

| | | | | |
|----------|--------------|-------------|-----------------|------------------------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> | Case number (if known) _____ |
| | First Name | Middle Name | Last Name | |

| | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|---------------------------------------|---|--|------------------------|
| Person Who Received Transfer _____ | | | |
| Number _____ Street _____ | | | |
| _____ | | | |
| City _____ State _____ ZIP Code _____ | | | |
| Person's relationship to you _____ | | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

| | Description and value of the property transferred | Date transfer was made |
|---------------------|---|------------------------|
| Name of trust _____ | | |
| _____ | | |

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
- ☒ Yes. Fill in the details.

| | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|---------------------------------------|----------------------------------|---|--|---|
| <u>Bank of America</u> | <u>XXXX- — — — —</u> | <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ | <u>08/2019</u> | <u>\$80.00</u> |
| Name of Financial Institution | | | | |
| <u>PO Box 660933</u> | | | | |
| Number _____ Street _____ | | | | |
| _____ | | | | |
| <u>Dallas, TX 75266</u> | | | | |
| City _____ State _____ ZIP Code _____ | | | | |

| | | | | | | |
|----------|--|--------------|-------------|-----------------|------------------------------|--|
| Debtor 1 | | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> | Case number (if known) _____ | |
| | | First Name | Middle Name | Last Name | | |

| | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--------------------------------------|---------------------------------------|---------------------------------|---|--|---|
| <u>Bank of America</u> | | XXXX- ____ ____ ____ ____ | <input type="checkbox"/> Checking | <u>08/2019</u> | <u>\$0.00</u> |
| <u>Name of Financial Institution</u> | | | <input checked="" type="checkbox"/> Savings | | |
| <u>PO Box 660933</u> | <input type="checkbox"/> Money market | | | | |
| <u>Number</u> <u>Street</u> | <input type="checkbox"/> Brokerage | | | | |
| | | | <input type="checkbox"/> Other _____ | | |
| <u>Dallas, TX 75266</u> | | | | | |
| <u>City</u> | <u>State</u> | <u>ZIP Code</u> | | | |

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

| Who else had access to it? | | Describe the contents | Do you still have it? |
|--------------------------------------|------------------------------|-----------------------|------------------------------|
| <u>Name of Financial Institution</u> | <u>Name</u> | | <input type="checkbox"/> No |
| <u>Number</u> <u>Street</u> | <u>Number</u> <u>Street</u> | | <input type="checkbox"/> Yes |
| | | | |
| <u>City</u> | <u>State</u> <u>ZIP Code</u> | | |
| <u>City</u> | <u>State</u> <u>ZIP Code</u> | | |

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

| Who else has or had access to it? | | Describe the contents | Do you still have it? |
|-----------------------------------|------------------------------|-----------------------|------------------------------|
| <u>Name of Storage Facility</u> | <u>Name</u> | | <input type="checkbox"/> No |
| <u>Number</u> <u>Street</u> | <u>Number</u> <u>Street</u> | | <input type="checkbox"/> Yes |
| | | | |
| <u>City</u> | <u>State</u> <u>ZIP Code</u> | | |
| <u>City</u> | <u>State</u> <u>ZIP Code</u> | | |

Debtor 1 Dawna Mary Icenhour
 First Name Middle Name Last Name

Case number (if known) _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

| Where is the property? | | Describe the property | Value |
|------------------------|---------------------|-----------------------|-------|
| Owner's Name | Number Street | | |
| Number Street | City State ZIP Code | | |
| City State ZIP Code | | | |
| | | | |

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

| Governmental unit | | Environmental law, if you know it | Date of notice |
|---------------------|---------------------|-----------------------------------|----------------|
| Name of site | Governmental unit | | |
| Number Street | Number Street | | |
| City State ZIP Code | City State ZIP Code | | |
| City State ZIP Code | | | |

25. Have you notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Fill in the details.

| | | | | | |
|----------|--|--------------|-------------|-----------------|------------------------------|
| Debtor 1 | | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> | Case number (if known) _____ |
| | | First Name | Middle Name | Last Name | |

| | | | | |
|---------------------|---------------|--------------------------|--|-----------------------|
| | | Governmental unit | Environmental law, if you know it | Date of notice |
| Name of site | | Governmental unit | | |
| Number | Street | Number | Street | |
| | | City | State | ZIP Code |
| City | State | ZIP Code | | |

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
- ☐ Yes. Fill in the details.

| | | | | |
|--------------------|--|------------------------|---------------------------|------------------------------------|
| | | Court or agency | Nature of the case | Status of the case |
| Case title | | Court Name | | <input type="checkbox"/> Pending |
| | | Number | Street | <input type="checkbox"/> On appeal |
| Case number | | City | State | ZIP Code |

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation
- ☐ No. None of the above applies. Go to Part 12.
- ☒ Yes. Check all that apply above and fill in the details below for each business.

| | | |
|---|---|---|
| <u>Building Hope Medical Staffing DBA</u> | Describe the nature of the business | Employer Identification number |
| Name | Staffed nurses to hospice companies for bedside care of terminal patients | Do not include Social Security number or ITIN. |
| <u>315 Parkwood Ln</u> | | EIN: _____ |
| Number Street | | |
| | Name of accountant or bookkeeper | Dates business existed |
| <u>Coppell, TX 75019</u> | | From <u>04/2017</u> To <u>12/2018</u> |
| City State ZIP Code | | |

| | | | | |
|----------|--------------|-------------|-----------------|------------------------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> | Case number (if known) _____ |
| | First Name | Middle Name | Last Name | |

| | | |
|---|--|---|
| <u>Professional Nursing Resources, LLC</u> Name <u>202 Samuel Blvd</u> Number Street <u>Coppell, TX 75019</u> City State ZIP Code | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| | | EIN: ____ - ____ - ____ |
| | Name of accountant or bookkeeper | Dates business existed |
| | | From <u>4/2014</u> To <u>3/2017</u> |

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.



No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City State ZIP Code

Debtor 1

Dawna

First Name

Mary

Middle Name

Icenhour

Last Name

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Dawna Mary Icenhour
Signature of Dawna Mary Icenhour, Debtor 1

Date 05/15/2020

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt? Did you claim the property as exempt on Schedule C?

Debtor 1

Dawna**Mary****Icenhour**

First Name

Middle Name

Last Name

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases**Will the lease be assumed?**

Lessor's name: Richard & Brigitte Davis

☐ No☒ Yes

Description of leased property: Residenital Lease

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X

/s/ Dawna Mary Icenhour

Signature of Debtor 1

Date 05/15/2020

MM/ DD/ YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 — Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | | |
|---|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non- exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- most domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | | |
|---|---------|--------------------|
| | \$1,167 | filing fee |
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | |
|---|-------|--------------------|
| | \$200 | filing fee |
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | | |
|---|-------|--------------------|
| | \$235 | filing fee |
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called *ajoint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030)(12/15)

United States Bankruptcy Court

Northern District of Texas

In re

Icenhour, Dawna Mary

Case No. _____

Debtor(s)Chapter 7**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|---|------------|
| For legal services, I have agreed to accept | \$2,615.00 |
| Prior to the filing of this statement I have received | \$2,615.00 |
| Balance Due | \$0.00 |

2. The source of the compensation to be paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/15/2020

Date

/s/ Randy Leigh Tipton

Signature of Attorney

Randy Leigh Tipton
Bar Number: 24039860
Lee Law Firm, PLLC
8701 Bedford Eules Rd 510
Hurst, TX 76053
Phone: (817) 265-0123

Lee Law Firm, PLLC

Name of law firm

Date: 5/15/2020

/s/ Dawna Mary Icenhour

Icenhour, Dawna Mary

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-------------|-----------------|
| Debtor 1 | <u>Dawna</u> | <u>Mary</u> | <u>Icenhour</u> |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | _____ | _____ | _____ |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>Northern District of Texas</u> | | |
| Case number (if known) | _____ | | |

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.

☒ **Not married.** Fill out Column A, lines 2-11.

☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.

☐ **Married and your spouse is NOT filing with you. You and your spouse are:**

☐ **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.

☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | | | | | | | | | | | | |
|---|---|--|----------|----------|--|---------------|-------|---|---------------|-------|---|---------------|-------|--|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | <u>\$4,863.76</u> | _____ | | | | | | | | | | | | |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| 5. Net income from operating a business, profession, or farm | <table><thead><tr><th></th><th>Debtor 1</th><th>Debtor 2</th></tr></thead><tbody><tr><td>Gross receipts (before all deductions)</td><td><u>\$0.00</u></td><td>_____</td></tr><tr><td>Ordinary and necessary operating expenses</td><td><u>\$0.00</u></td><td>_____</td></tr><tr><td>Net monthly income from a business, profession, or farm</td><td><u>\$0.00</u></td><td>_____</td></tr></tbody></table> | | Debtor 1 | Debtor 2 | Gross receipts (before all deductions) | <u>\$0.00</u> | _____ | Ordinary and necessary operating expenses | <u>\$0.00</u> | _____ | Net monthly income from a business, profession, or farm | <u>\$0.00</u> | _____ | <div>Copy here → <u>\$0.00</u></div> |
| | Debtor 1 | Debtor 2 | | | | | | | | | | | | |
| Gross receipts (before all deductions) | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| Ordinary and necessary operating expenses | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| Net monthly income from a business, profession, or farm | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| 6. Net income from rental and other real property | <table><thead><tr><th></th><th>Debtor 1</th><th>Debtor 2</th></tr></thead><tbody><tr><td>Gross receipts (before all deductions)</td><td><u>\$0.00</u></td><td>_____</td></tr><tr><td>Ordinary and necessary operating expenses</td><td><u>\$0.00</u></td><td>_____</td></tr><tr><td>Net monthly income from rental or other real property</td><td><u>\$0.00</u></td><td>_____</td></tr></tbody></table> | | Debtor 1 | Debtor 2 | Gross receipts (before all deductions) | <u>\$0.00</u> | _____ | Ordinary and necessary operating expenses | <u>\$0.00</u> | _____ | Net monthly income from rental or other real property | <u>\$0.00</u> | _____ | <div>Copy here → <u>\$0.00</u></div> |
| | Debtor 1 | Debtor 2 | | | | | | | | | | | | |
| Gross receipts (before all deductions) | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| Ordinary and necessary operating expenses | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| Net monthly income from rental or other real property | <u>\$0.00</u> | _____ | | | | | | | | | | | | |
| 7. Interest, dividends, and royalties | <u>\$0.00</u> | _____ | | | | | | | | | | | | |

Dawn

Mary

Lemour

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you..... \$0.00

For your spouse.....

\$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below

Total amounts from separate pages, if any.

+ \$4,863.76 + = \$4,863.76

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Total current
monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here → \$4,863.76

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b. \$58,365.12

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Texas

Fill in the number of people in your household.

2

Fill in the median family income for your state and size of household.....

13. \$66,899.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Dawna

Mary

Icenhour

Case number (if known)

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Dawna Mary Icenhour

Signature of Debtor 1

Date 05/15/2020

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Icenhour, Dawna Mary**

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 05/15/2020

Signature /s/ Dawna Mary Icenhour
Dawna Mary Icenhour, Debtor

AES/NCT
P.O. Box 61047
Harrisburg, PA 17106

AES/RBS Citizens
PO Box 61047
Harrisburg, PA 17106

Attorney General of Texas
Bankruptcy Section
400 South Zang, Ste 1100
Dallas, TX 75208

Bank of America
PO Box 982238
El Paso, TX 79998

Capital One
P.O. Box 30285
Salt Lake City, UT 84130

Citicards CBNA
P.O. Box 6241
Sioux Falls, SD 57117

Comenitycb/Ulta
P.O. Box 182120
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